



AUG 27 1999

Mr. David W. Hood
Secretary
Department of Health and Hospitals
1201 Capital Access Road
PO Box 629
Baton Rouge, LA 70821-0629

Dear Mr. Hood:

We are pleased to inform **you** that Phase II of **your** Children's Health Insurance Program (Title XXI) plan has been approved **as** amended **by** the information you submitted on June 30, 1999. We appreciate the **efforts** of **your staff** and extend our congratulations to Louisiana on the approval of **your** plan.

The Department of ~~Health and Human~~ Services will continue to provide information related to areas such **as** enrollment and administrative simplification, models of successful outreach **programs**, comprehensive systems and measures of quality care, linkages to other children's health programs, and **data** options through **State** letters and **through the** Departmental website. I hope you will find **these resources helpful as you implement your program.**

Your project officer is Mr. Edward Tregoe. Mr. Tregoe is available to **answer any questions** concerning the implementation of **your Title XXI Program** and can be reached at **(410) 786-6827**. **His** address is:

Health Care Financing Administration
Center **for** Medicaid **and State** Operations
Mail Stop **S2-01-16**
7500 Security Boulevard
Baltimore, Maryland **21244-1850**

Page 2 - Mr. David W. Hord

Official communications regarding program matters should be sent simultaneously to the project officer and to Mr. Andy Fredrickson, Associate Regional Administrator for the Division of Medicaid and State Operations in the Dallas Regional Office.

Mr. Fredrickson's address is:

Health Care Financing Administration, Region VI
1301 Young Street
Room 714
Dallas, Texas 75202

Again, we extend our congratulations and look forward to working with you during the course of the program.

Sincerely,

Michael M. Hash
Deputy Administrator

cc: Dallas Regional Office
